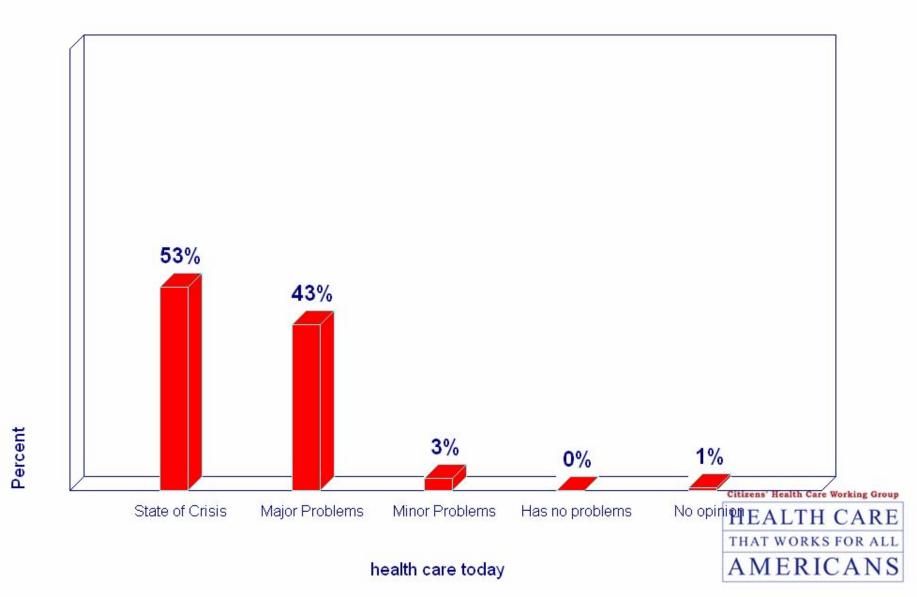


Orlando

January 24, 2006



H- Which one of these statements do you think best describes the U.S. health care system today?



Which one of the following do you think is the MOST important reason to have health insurance?

1.	To pay for everyday medical expenses	30%
2.	To protect against high medical costs	68%
3.	No opinion	2%





Jonathan Ortmans

Moderator



Of the most frequent answers the group gave, which of the values/principles are most important to you?

1.	Affordable for all	26%
2.	Equal access to basic services	20%
3.	Fundamental fairness	6%
4.	Health care is a right	12%
5.	Personal responsibility / active participation	5%
6.	Ever-improving quality	1%
7.	Universal coverage	24%
8.	Mental and emotional health	1%
9.	Comprehensive and understandable	2%
10	. Reinforce healthy lifestyles and choices	4%

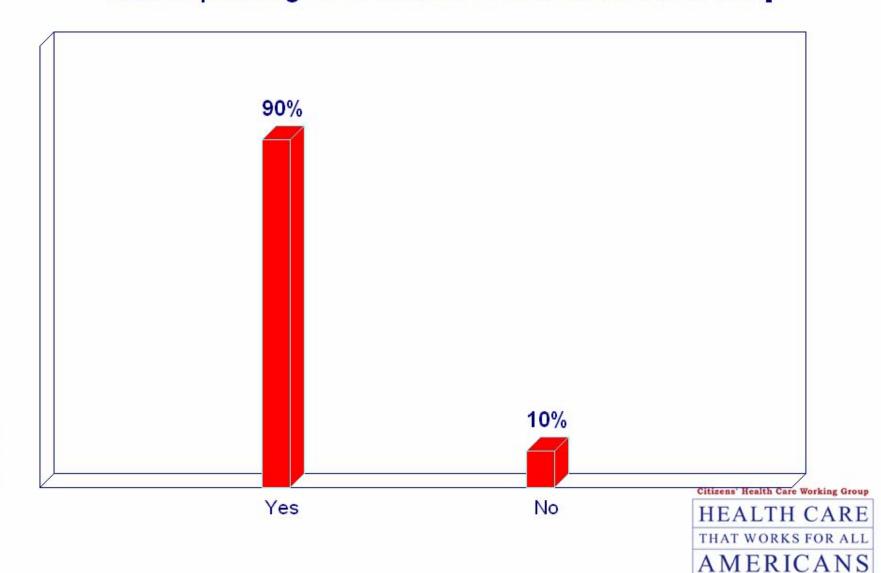


Of the most frequent answers the group gave, which of the values/principles are most important to you?

1.	Empowered and educated consumers	21%
2.	Access to primary, mental and physical care	49%
3.	Measurable outcomes	6%
4.	Prevention	24%



C- Should it be public policy that all Americans have affordable health care coverage? [By public policy we mean that the stated public goal is set out in federal or state law.]



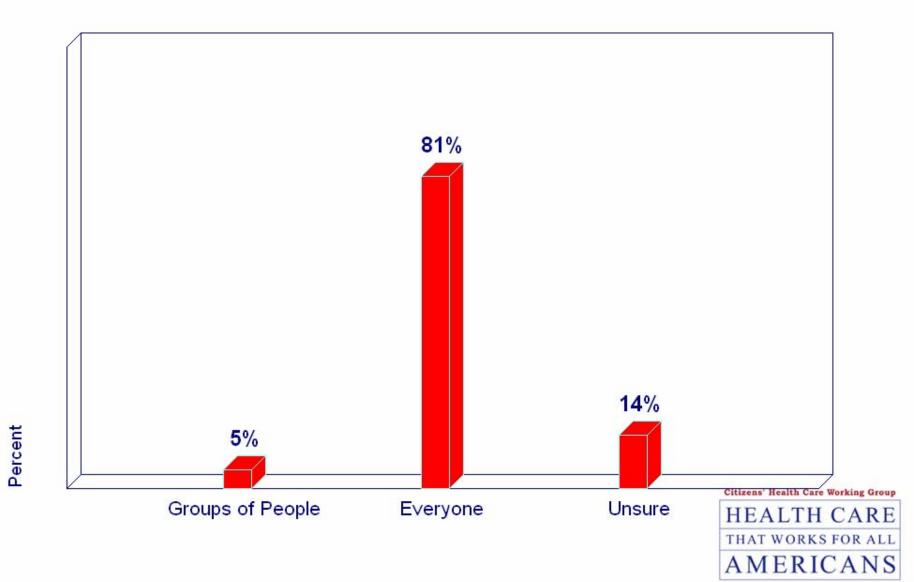


Jonathan Ortmans

Moderator



A- Which of these approaches would be the better way to provide coverage?



Of the most frequent answers the group gave, what would you add?

1.	Access to more innovative options of delivering care	13%
2.	Expansion of prevention options	15%
3.	Vision and hearing (including prescription glasses)	22%
4.	Wellness education, and disease management	16%
5.	Interventive care, e.g. massage / alternative	5%
6.	Measurable effectiveness	9%
7.	More dental care, e.g. sealants and TMJ	11%
8.	Adult day care	2%
9.	Hospice or pallative care	6%
10.	Nutritional counseling	2%



Of the most frequent answers the group gave, what would you add?

1. Long-term care services 0%

2. Assisted living with skilled nursing care 0%

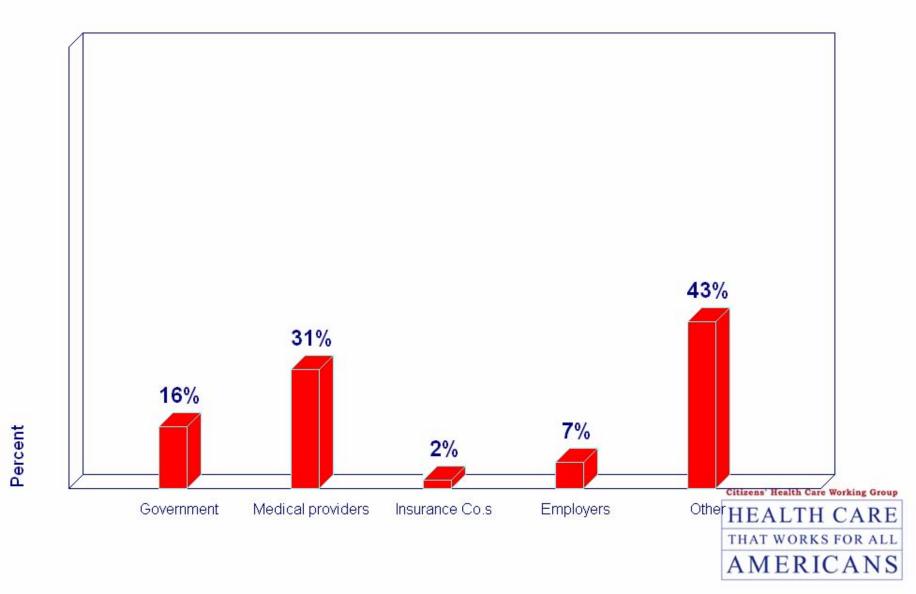


Of the most frequent answers the group gave, what would you take out?

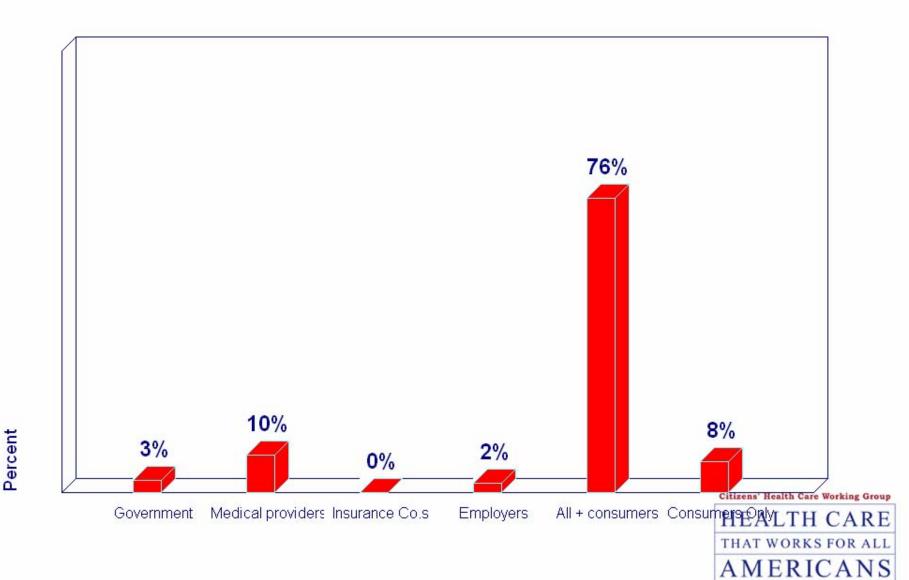
1.	Chiropractic	38%
2.	Substance abuse	13%
3.	Physical, occupational and speach therapy	2%
4.	Prescription drugs (deny access to name-brand)	5%
5.	Anything not proven to be effective	14%
6.	None	28%



D- Who ought to decide what is in a basic benefits package?



E- Who ought to decide what is in a basic benefits package?





Jonathan Ortmans

Moderator



Which of these kinds of difficulties is the most important to address?

1.	Navigating the health care system and getting past the gatekeepers	24%
2.	Hard finding health insurance due to pre-existing conditions for self-employed	11%
3.	Continuity of care from state-to-state or job-to-job	9%
4.	Hours of availability of services	9%
5.	Access to specialty care, e.g. GI, neuro	9%
6.	Transportation	7%
7.	Not strong enough community-based system	15%
8.	Maintaining the same providers	4%
9.	Language education and cultural barriers	8%
10.	No covered facility available in city (location)	4%



Which of these kinds of difficulties is the most important to address?

1.	Access for immigrants	3%
2.	No incentives to get off public programs	15%
	(transition from public to private)	
3.	Fragmented care (physician-patient relationship)	10%
4.	Lack of alternatives to emergency room care	12%
5.	Insurance companies not covering new tests	2%
6.	Lack of education of consumer	12%
7.	Cost	47%



Which of these kinds of difficulties is the most important to address?

1.	Navigating the health care system and getting	10%
	past the gatekeepers	
2.	Not strong enough community-based system	11%
3.	No incentives to get off public programs	11%
	(transition from public to private)	
4.	Cost	67%



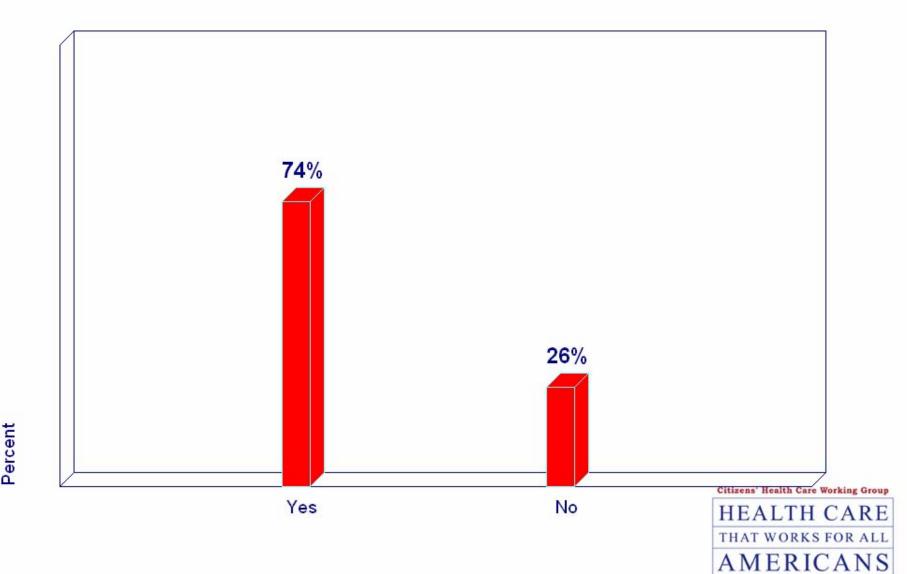


Jonathan Ortmans

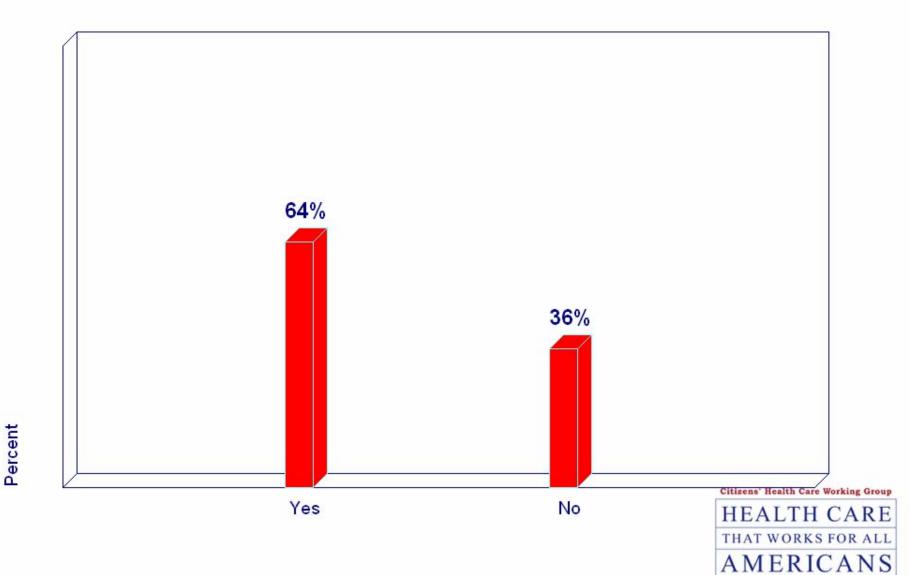
Moderator



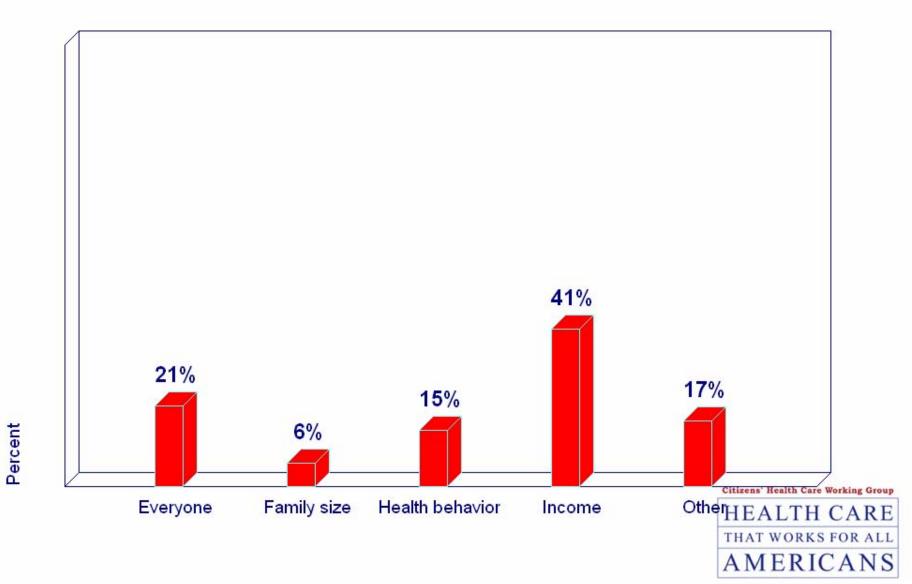
A- Should everyone who can afford to do so be required to enroll in basic health insurance?



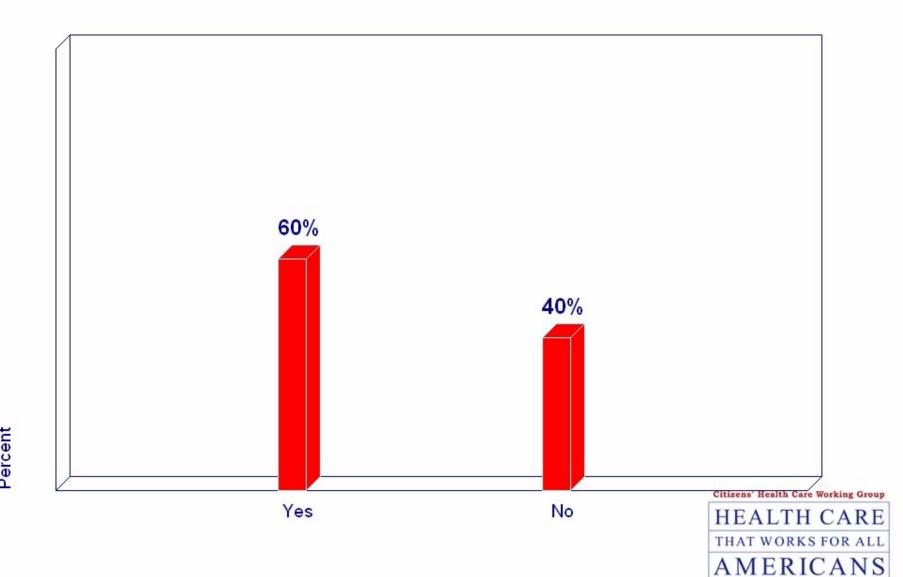
B- Should some people be responsible for paying more than others?



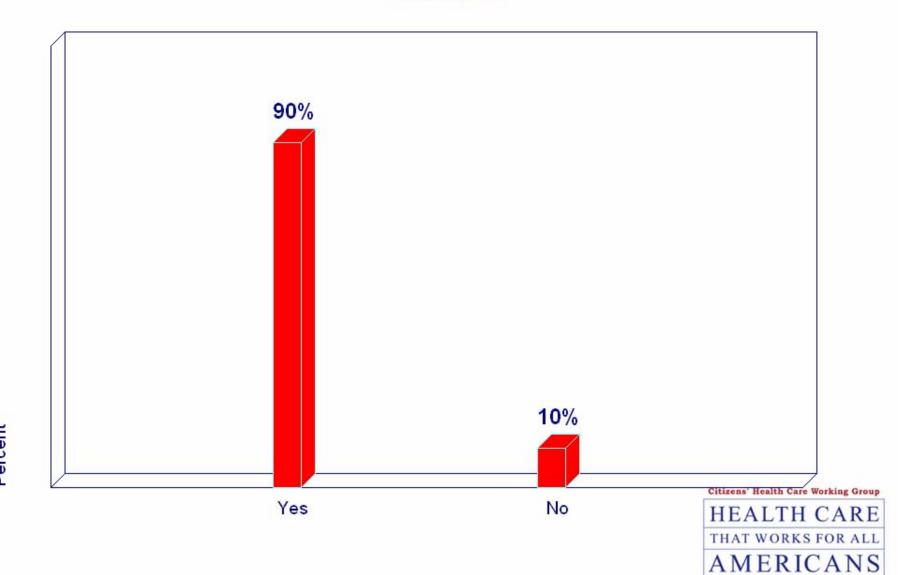
C- What criteria should be used for making some people pay more?

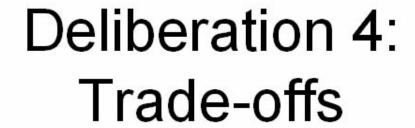


D- Should public policy continue to encourage though tax breaks employer-based health insurance?



E- Do you think government resources should continue to subsidize health insurance for people who can't otherwise afford it?



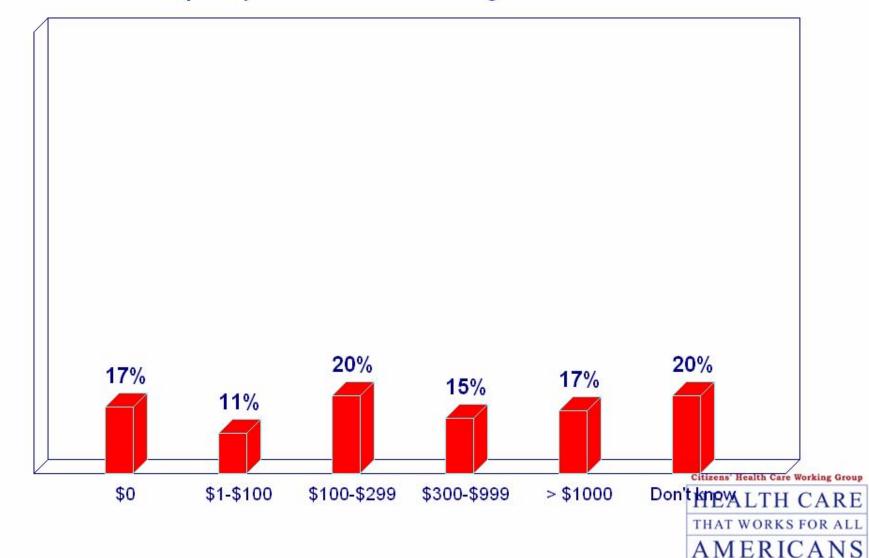


Jonathan Ortmans

Moderator



A- How much more would you personally be willing to pay in a year (in premiums, taxes, or through other means) to support efforts that would result in every American having access to affordable, high quality health care coverage and services?



Percent

Considering the rising cost of health care, which of the following should be the MOST important priority for public spending to reach the goal of health care that works for all Americans?

1.	Guaranteeing that there are enough health care providers, especially in areas such as inner cities and rural areas	3%
2.	Investing in public health programs to prevent disease, promote healthy lifestyles, and protect the public in the event of epidemics or disasters	17%
3.	Guaranteeing that all Americans have health insurance	33%
4.	Funding the development of computerized health information to improve the quality and efficiency of health care	3%
5.	Funding programs that help eliminate problems in access to or quality of care for minorities	2%
6.	Funding biomedical and technological research that can lead to advancements in the treatment and prevention of disease	0%
7.	Guaranteeing that all Americans get health care when they need it, through public "safety net" programs (if they can not afford it).	31%
8.	Preserving Medicare and Medicaid	11%

